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DECLARATION AND POWER OF ATTORNEY

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PATENTS, INCLUDING DESIGN FOR APPLICATION BASED ON PCT; PARIS CONVENTION; NON PRIORITY; OR PROVISIONAL APPLICATIONS As a below named inventor, I declare that my residence, post office address and citizenship are stated below next to my name, the information given herein is true, that I believe that I am the original, first and sole inventor (if only one name is listed at 201 below), or an original, first and joint inventor (if plural inventors are named below at 201-203, or on additional sheets attached hereto) of the subject matter which is claimed and for which patent is sought on the invention entitled: METHOD FOR THE PURIFICATION OF BLOOD BY MEANS OF HEMODIALYSIS O/OR HEMOFILTRATION AND APPARATUS FOR PERFORMING SAID METHOD 102 which is describ d and daimed in: PCT International Application No. filed specification 2 9 2001 the attached the specification in application Serial No. 09/900,450 filed July 9, 2001 (if applicable) and amended on I hereby state that how reviewed and professand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duby consistency in the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I hereby claim foreign professand for Title 35, United States Code, §119 (a)-(d) of any foreign applications, §1.56. For patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed: Priority Claimed 00 114 654.7 **EUROPE** 7 July 2000 X (Number) (Country) (Day/Month/Year Filed) Yes (Number) (Country) (Day/Month/Year Filed) (Number) (Country) (Day/Month/Year Filed) I hereby claim the benefit under Title 35, United States Code,§119(e) of any United States provisional application(s) listed below: Filing Date Application No. Filing Date I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this (Application Serial No.) (Filing Date) (Status: patented, pending, abandoned) POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorneys (Registration No.) to prosecute this application, receive and act on instructions from my agent, and transact all business in the Patent and Trademark Office connected therewith. HARVEY B. JACOBSON, JR. (20,851); JOHN CLARKE HOLMAN (22,769); MARVIN R. STERN (20,640); ALLEN S. MELSER (27,215); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (29,851); IRWIN M. AISENBERG (19,007); WILLIAM E. PLAYER (31,409); YOON S. HAM (45,307) and NATHANIEL A. HUMPHRIES (22,772) SEND CORRESPONDENCE TO: CUSTOMER NO. 00136 DIRECT TELEPHONE CALLS TO: (please use Attorney's Docket No.) (202) 638-6666 JACOBSON HOLMAN PROFESSIONAL LIMITED LIABILITY COMPANY JACOBSON HOLMAN 400 SEVENTH STREET, N.W. PROFESSIONAL LIMITED LIABILITY COMPANY WASHINGTON, D.C. 20004 *Inventor(s) name must include at least one unabbreviated first or middle name. FULL NAME FAMILY NAME GIVEN NAME MIDDLE NAME OF INVENTOR <u>PEDRINI</u> .uciano **RESIDENCE &** CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITIZENSHIP S<u>ondrio</u> ITALY ITALY POST OFFICE POST OFFICE ADDRESS CITY STATE OR COUNTRY **ADDRESS** ZIP CODE Via Dante, 21 Sondrio ITALY I-23100 FULL NAME FAMILY NAME GIVEN NAME MIDDLE NAME OF INVENTOR WIESEN **Gerhard** RESIDENCE & STATE OR FOREIGN COUNTRY CITIZENSHIP COUNTRY OF CITIZENSHIP Eppstein **GERMANY** GERMANY POST OFFICE POST OFFICE ADDRESS CITY ADDRESS STATE OR COUNTRY ZIP CODE Hauptstrasse 73 Eppstein GERMANY D-65817 FULL NAME * AMILY NAME GIVEN NAME MIDDLE NAME OF INVENTOR RESIDENCE & CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITIZENSHIP POST OFFICE POST OFFICE ADDRESS CITY STATE OR COUNTRY **ADDRESS** ZIP CODE

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under section 1001 of Title 18 of the United States Code; and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

collicon the	SIGNATURE OF INVENTOR 202*	SIGNATURE OF INVENTOR 203*
DATE & 31-08-2001	DATE X 73/08/01	DATE

ors are named on separately numbered sheets attached hereto.

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